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ABSTRACT

This review critically examines various aspects of school-based consultation between regular classroom teachers and teachers of special education. First, current approaches to consultation are described and obstacles to successful integration of elementary students with learning or behavioral problems into mainstream regular education classrooms are identified. A behavioral consultation model for promoting collaboration between the consulting teacher and the regular teacher is advocated. The technology of consultation, i.e., the process and content skills related to the role of the consulting teacher, are discussed. The consultative interview is seen as central to the consultation process and a critical diagnostic and problem-solving tool. A step-by-step model for planning and implementing specialized instructional programs is offered. Finally, an ecobehavioral perspective on consultation is advocated as a useful model for the consulting teacher. (Contains 81 references.) (DB)

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Facilitating Mainstreaming through Behavioral Consultation[1]

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MULTIDISCIPLINARY DIAGNOSTIC AND TRAINING PROGRAM

UNIVERSITY OF FLORIDA

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Monograph # 25
August, 1989

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MULTIDISCIPLINARY DIAGNOSTIC AND TRAINING PROGRAM (MDTP)

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PREFACE

The educational milieu of mainstream regular education classrooms often mitigates against the successful reintegration of students with special instructional and motivational needs. The present monograph examines obstacles to successful integration of children with behavior and learning problems. A behavioral consultation model for promoting collaboration between the consulting teacher and the regular teacher is advocated. Process and content skills related to the role of the consulting teacher are discussed. A step-by-step model for planning and implementing specialized instructional programs is presented. Finally, an ecobehavioral perspective on consultation is advocated as useful model for the consulting teacher.

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Facilitating Mainstreaming Through Behavioral Consultation

Introduction

Accumulated evidence suggests that many students with learning disabilities (LD) and a majority of students with behavior disorders/ emotional handicaps (BD/EH) fail to sustain a pattern of behavior acceptable for learning and adjustment in mainstream settings (Gable, McConnell & Nelson, 1986). Students with learning disabilities often evidence scattered academic performance, reduced attention spans and high levels of distractibility, while students with behavior difficulties exhibit academic failure and engage in acts of noncompliance and aggression which evoke negative reactions from adults (Braaten, Kauffman, Braaten, Polsgrove & Nelson, 1988; Kauffman, 1988; Wood, 1988). Not surprisingly, BD/EH students are among the least acceptable candidates for mainstreaming (Braaten et al., 1988; Safran & Lutz, 1984). Since it is doubtful that public policy will shift from the doctrine of "least restrictive environment" (LRE), more effective strategies to serve students with learning and behavior handicaps.

One approach to mainstreaming that is gaining in popularity casts the special education teacher in the role of consultant to the regular classroom teacher. Today, consultation is recognized as a legitimate service delivery option along the continuum of least-to-most restrictive service delivery options (Haight, 1984; Huefner,

1988; Kerr & Nelson, 1983). Success of teacher consultation hinges on the three-fold proposition that: (a) regular classroom teachers are receptive to the consultative process, (b) special classroom teachers are prepared to consult effectively, and (c) a proven technology of consultation exists. Unfortunately, regular education teachers often are unreceptive to collaborative programming and the team process of problem- solving. Although special education teachers increasingly are assuming consultation responsibilities, most are insufficiently prepared for working with colleagues with students exhibiting learning and behavior problems especially when they have little knowledge of the reintegration process (Evans, 1980; Idol-Maestas & Ritter, 1985). The special education teacher's limited experience in regular classroom settings also may contribute to difficulties in implementing a consultation model. To date, limited cooperation between regular and special educators has been reported (Laycock & Tonelson, 1985). In addition, experience confirms the importance of certain fundamental aspects of the consultation process, however a sound technology of teacher consultation still remains to be validated.

The purpose of this monograph is to examine critically various aspects of school-based consultation. First, current approaches to consultation are described and obstacles to reintegration of students with special learning needs are discussed. Third, the technology of consultation (i.e., the process and content skills) associated with successful implementation of consultative models is

presented. The consultative interview is discussed as central to the process of consultation and in relation to its importance as a diagnostic and problem-solving tool. A behavioral framework for examining the referral problem and situational variables which impinge on the problem is reviewed. An ecobehavioral consultation model for serving LD and BD students in the mainstream is advocated.

Current Consultation Practices

Various professionals have argued for lowering the barriers, redefining the relationship and promoting a shared responsibility between regular and special education in meeting individual student's needs (Stainback & Stainback, 1984, 1985; Will, 1986). Teacher consultation has emerged as one viable means of serving special needs students whose primary placement is in regular education settings (Greenburg, 1985). Several distinct consultation approaches have been developed: pre-referral assistance (Graden, Casey & Christenson, 1985), the teacher assistance team (Chalfant, Pysh & Moultrie, 1979), the consulting teacher program (Knight,et al., 1981), the resource/consulting teacher program (Idol-Maestas, 1985), and the teacher resource team (Maher, in press). (Readers are referred to Reisburg and Wolfe (1986) and West and Idol (1987) for fuller descriptions.)

Although empirical support to substantiate the effectiveness of consultation as a service delivery approach varies (Huefner, 1988), positive outcomes with mildly handicapped students have been demonstrated for several consultation models (Curtis, Zins &

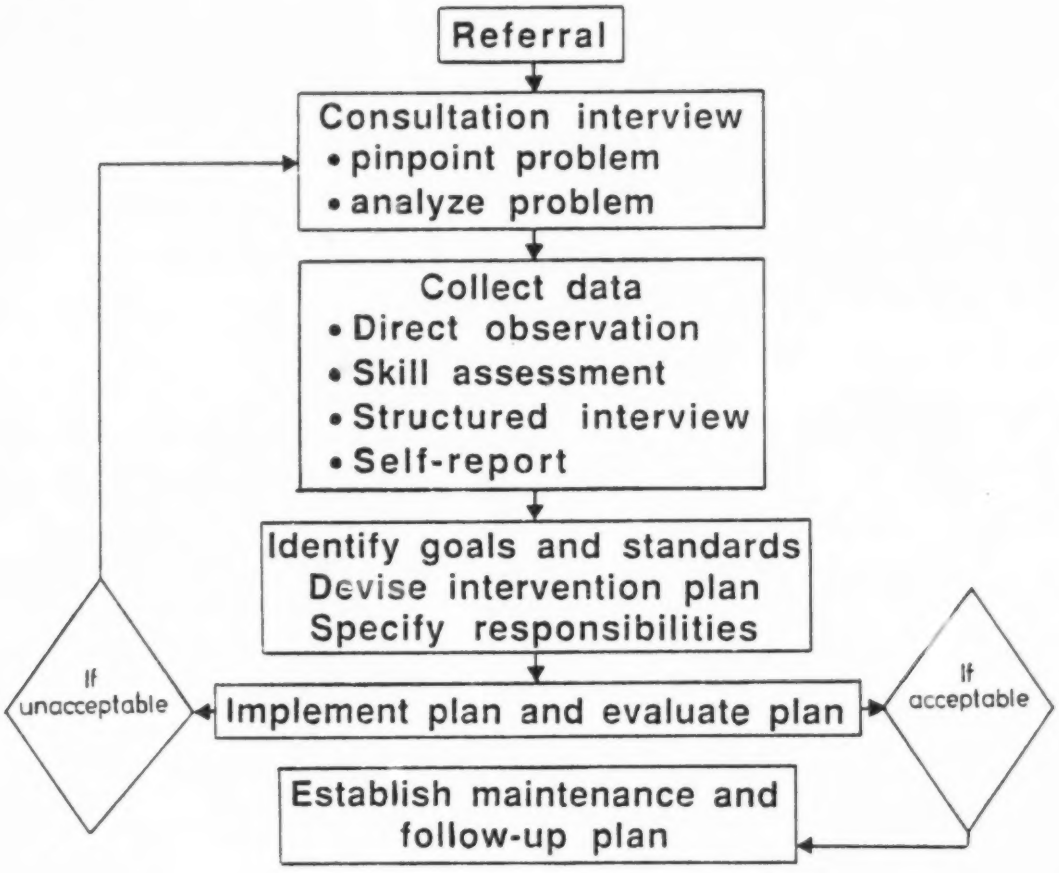
Graden, 1985). Even so, only a few efforts have been reported that dealt specifically with BD students (e.g., McGlothin, 1981; Nelson & Stevens, 1981). Moreover, sources dealing with specific consultation and problem-solving skills still are scattered and often are insufficient to meet the needs of teachers serving BD students. The net effect is that teacher and administrator knowledge of school-based consultation approaches for the LD and BD student remains limited.

Obstacles to collaboration and consultation are many and varied. From the beginning, regular educators have not been favorable toward integration of handicapped students (e.g., Ysseldyke & Algozzine, 1982). A few of the problems include negative impact of labels, insufficient role definition regarding services to be provided, limited time and limited administrative support (Evans, 1980; Haight, 1984; Idol-Maestas & Ritter, 1985). Furthermore, fear and misunderstanding regarding the behaviorally disordered student in particular have not diminished greatly over the last ten years (Gable, et al., 1987). Questions of inadequate knowledge, procedural competence, and lack of support underlie negative feelings toward handicapped individuals (Strain & Kerr, 1981). These concerns are exacerbated with teachers and BD students. Some of the least and most desirable classroom behaviors reported by regular teacher are shown in Table 1.

The "disturbingness" perception that many regular classroom teachers hold toward students with behavioral difficulties

Figure Caption

Figure 1. Ecobehavioral Consultation Model



(Algozzine, 1980) is linked to the view that they are "irresponsible, inattentive, immature and defiant" (Bullock, Donahue, Zagar & Pelton, 1985). The work of Midway (1979), Safran and Safran (1987) and Gersten, Walker and Darch (1988) demonstrates that attributional assumptions regarding causality and stability of the problem have a significant influence on teacher tolerance and on resistance to reintegraion. Other factors that negatively affect teacher receptivity to regular class placement of the student with special learning and motivational needs include the severity of the problem behavior(s),the contagion effect and manageability of problem behavior. (A more detailed discussion of these factors can be found in Safran and Safran (1987).

At face value, research on attributional assumptions casts a pale over efforts to reintegrate BD students. Interestingly, regular classroom teachers who are most likely to be effective with behavior problem students are those who most often oppose their mainstream placement (Gersten et al., 1988). However, if the necessary assistance is provided regarding management and instruction of the mainstreamed student, "it is likely that these skilled teachers with high standards would be the first to accept handicapped students into their classrooms" (p. 437) (Gersten et al., 1988). As Margolis and McGettigan (1988) indicated, teachers who hold high expectations usually put forth the needed effort as long as collaboration produces reasonable solutions.

Consultation: Process and Content

The role of a teacher consultant requires "specific knowledge, skills in analysis and problem-solving strategies, as well as an aptitude for human relations, communication, and skill development" (Haight, 1984). Kerr and Nelson (1983) have described problem-solving, the foundation of consultation, as consisting of: (a) problem identification, (b) problem analysis, (c) plan implementation and (d) plan evaluation. Problem identification is recognized as the most important phase (Bergen & Tombari, 1976; Conoley, Conoley, Apter, 1981) and usually is accomplished through the consultation interview. Conoley et al. (1981) assert that collaboration that leads to mutual understanding of the exact nature of the problem has a 95% chance of a satisfactory solution. Given the especially critical nature of problem identification, the following section is devoted to discussion of the consultation interview. Subsequently, the following components of the behavioral framework for the consultation process are presented: analyzing problems, collecting data, validating problems, planning interventions, evaluating programs, and following up. The flow chart in Figure 1 illustrates the entire process from initial referral to phasing out and following up.

The Consultation Interview

The consultation interview requires two separate but related sets of skills: (a) establishing positive relationships and (b)

Table 1
Regular Classroom Teacher Standards and Expectations

Elementary

Most Desired Behaviors	Least Desired Behaviors
- good work habits	- physical aggression
- self-control	- stealing
- responsive to teacher requests	- self-abusive behavior
- behavioral model for others	- teacher defiance
- positive with peers	- inappropriate sexual behavior
	- disruptive behavior
	- enuresis

Secondary

Most Desired Behaviors	Least Desired Behaviors
- prepared for class	- inappropriate sexual behavior
- self-control	- stealing
- good study habits	- physical aggression
- compliant to teacher requests	- refusal to obey rules
- demonstrates rule following behaviors	- destruction of property
	- disruptive behavior
	- self-abusive behavior

From Walker and Rankin (1983) and Kerr and Zigmond (1986).

eliciting detailed information on various aspects of the referral problem. The initial objective of the consultation interview is to establish rapport with the regular classroom teacher. The few studies reported suggest that eye contact, efficiency of interviewer discussion, the use of serial questioning (from open-ended to closed questions), paraphrasing for clarification, the expression of empathy toward the teacher, and the display of enthusiasm toward solving the problem are attributes that the consulting teacher should possess (e.g., Curtis & Meyers, 1985; Friend, 1985; Gutkin, 1986; Murphy, 1985; West & Connon, 1988).

Pitfalls to successful consultation include what has been termed "value incompatibility" (Rosenfield, 1983). For example, use of specific behavior analytic terms (e.g., response cost, over-correction) may precipitate conflict or tension between a consulting teacher and a classroom teacher who is less likely to share a behavioral orientation. Another recommendation is that the use of non-specific jargon (e.g., poor motivation, poor self-concept) be minimized and replaced with specific descriptions of the problem behavior. Reducing such jargon helps to eliminate confusion of the problem itself as well as the intervention procedure (Gable et al., 1987; Kerr & Nelson, 1983). Discussion should also focus on the student rather than teacher behavior to diminish the perception that the consulting teacher is being critical or "giving advice" to the regular education teacher (Gable et al., 1987). A primary aim of the consultation interview

is to build and maintain a level of communication that establishes mutual respect, responsibility and commitment.

Another major goal of the consultation interview is to employ specific verbal skills to obtain from the teacher a full and accurate description to pinpoint the problem so that it can be analyzed before an intervention plan is designed. The effective consulting teacher will employ a variety of specific verbal skills in order to obtain a full and accurate account of the problem and make assumptions about the events which may impact upon the problem. Based on the work of Brown et al. (1982), Friend (1985), Hayes and Jensen (1979) and Nelson and Stevens (1981), we have identified six major categories of verbal behavior which appear to be central to problem identification by means of a successful consultation interview.

1. Behavior verbalizations. Introductory remarks including a rationale and role definitions (e.g., " I am the consulting teacher for Westside Middle School. I understand that Jon has been creating a lot of havoc in your classroom. It is my job to assist you in devising a program to help Jon control his behavior and succeed in social studies."). Serial questions designed to pinpoint the problem (e.g., "What does Jon do that is most disruptive? Is his calling out or self-talk more disturbing? So, the first behavior you want to change is his call outs?").

2. Behavior setting verbalizations. Questions that serve to uncover antecedent and subsequent events that immediately

surround the target behavior (e.g., "How do you routinely begin the lesson? What is your usual response to Jon? How do the other students act when Jon . . .?").

3. Evaluation verbalizations. Statements that relate to data collection and problem analysis and evaluation (e.g., "I'll visit on Tuesday morning and watch Jon durirg social studies. I will take some data on his behavior at this time. I'll count on you to let me know whether his behavior is typical or not.").

4. Summary verbalizations. Statements that review or reiterate the content of the interview and decisions that were made (e.g., "The problem certainly seems to be . . .; and, what I believe we each agreed to do is . . .").

5. Empathy verbalizations. Comments intended to establish and maintain a sense of understanding and trust (e.g., It is very frustrating to keep going the extra mile when it never seems to be enough.").

6. Deflection verbalizations. Statements intended to redirect credit for the program plan or intervention (e.g., "Something you said a few minutes ago reminded me of a procedure Mrs. Hart tried last year that might work for us.").

Obviously, opening behavioral verbalizations and summary verbalizations occur at the start and end of the interview, however, other of verbal behavior may be used in an intermixed fashion throughout the consultation interview. A sample dialogue between a consulting teacher and a regular classroom teacher is

presented in Table 2. Each of the six categories of verbal behavior is represented and noted.

Behavioral Framework for Consultation

By combining communication and interpersonal skills with content skills in the area of applied behavior analysis, the consulting teacher can identify the problem(s) with accuracy and increase the likelihood of designing a successful intervention. According to Hay, Hay, Angle and Nelson (1979), Kanfer and Grimm (1977), Kerr and Nelson (1983) and Hendrickson, Gable & Shores (1986) referral problems may be categorized as follows: (a) behavioral excesses--which are based on (1) frequency, (2) intensity and/or (3) duration; and (b) behavioral deficits--which are based on (1) insufficient frequency, (2) insufficient intensity/ duration, and/or (3) inappropriateness according to social expectations. In the former instance, it may be determined that the student does not possess the expected skills and exhibits high rates of undesirable alternative behaviors. In the latter case, the behavior/skill may be in the student's repertoire but s/he does not engage in it. This excess-deficit behavior distinction is fundamental to developing a behavioral approach to consultation.

Analyzing problems. The process of pinpointing and analyzing referral problems via the consultation interview can be enhanced by comparing the content of the interview within and across sessions (Hays et al., 1979). By audio-taping each interview the

Table 2
Consulting Teacher--Regular Teacher Interview

Regular Teacher	Consulting Teacher
Karen, do you have time to talk with me about Jon?	Sure, come in. What seems to be the problem, Mark?
You won't believe this, after all of the progress we'd made. Jon's started his old habits again!	Jon has started yelling out during group lessons again. [*Behavior Verbalization*]
Yes, I think he was put on this earth to personally test me!	Jon can be so frustrating! He'd try a saint. [*Empathy*]
You're absolutely right. He knows the rules, but shouts out answers before I even finish asking the question. Do you know what else? [Mark laughs.] He's usually right.	So, he's calling out the right answers, and usually does this before you finish asking the questions. That's a bit different from before. What did you do then? [*Behavior Setting Verbalization*]
Well, I admit that I didn't handle it well. At first, I tried to ignore him. So-o-o, then he starts whining, "I said that, that's just what I said. You never listen to me."	You're right, that sounds like old Jon, the complainer. And if I remember correctly, the tone of his voice also is irritatingly high pitched. [*Behavior Verbalization*]
Precisely, it makes me grind my teeth. So, I tell him, "Jon, you need to raise your hand before you answer, or you can go to the principal's office. That should make your mother happy."	No comment. Attentive listening.
Actually, I guess I resorted to threatening him, didn't I?	[Laughing lightly]. Last year, that would have been the first thing you tried. And, this time you thought of alternatives--ignoring him, stating the rules. I think you did very well.

Regular Teacher	Consulting Teacher
	So, what do you think should be the next step in figuring out a plan for Jon?
Well, I would like you to observe him and see if you have any ideas on how to stop his calling out.	Good, I am free tomorrow morning and could observe at 10 a.m. during social studies. [*Evaluation Verbalization*]
You know, I feel better just talking with you. Jon can be a pain in the neck, but I am willing to give him another chance.	That's great. You really care about your students and show it by going out of your way to help them. You're one in a million. [*Praise/Empathy*]
	So, let's see if we are set. You will be teaching a group lesson at 10 tomorrow morning. I will observe for 45 minutes to see how often Jon calls out. [*Summary Verbalization*]
Yes, I'll talking about the Romans.	
	Can we meet during 5th period planning to discuss my observations?
That would be perfect. I hope you come up with something that will work this time.	I'll review my notes on our last program with Jon and those of some similiar students. I'm sure we can design a good plan to get him back on the right track. [*Deflection Verbalization*]
Thanks, Karen.	See you tomorrow. And, by the way, Mark, thanks for talking with me before Jon's behavior completely intolerable.

consulting teacher will not have to worry about losing information (Hayes & Jensen, 1979). Obtaining information on the student's behavior and performance from other informants (e.g., several teachers, administrators, peers and the student him/herself) also is considered best practice. While rating scales and problem behavior checklists can contribute to problem specification they have some limitations in comparison to direct observation of student behavior. Unfortunately, classroom observation is not always acceptable to the mainstream teacher (Speece & Mandel, 1980) and indirect measures may be required initially.

In further examining the referral problem, it is sometimes helpful consider those behaviors elementary and middle school teachers rate as most desirable and least desirable. Behaviors teachers typically expect of their students were listed in Table 1. Focusing on the establishment of desired behaviors and the reduction of undesired behaviors, is the best plan especially when considering maintenance and generalization as the initial intervention program is being designed.

Collecting data. Zabel, Peterson, Smith and White (1982) showed that major discrepancies exist between the availability and usefulness of assessment data. Most conventional sources of information (and even the consultation interview) may yield data that are too vague, subjective and/or distant from the specific problem and classroom realities to enable sound programming decisions. Consequently, the consulting teacher may need to

gather data that pertains directly to the identification of useful intervention strategies. Clearly, an initial step to collecting relevant information includes observation of the student in the classroom and careful examination of the general setting events, the specific environmental stimuli and the schedules of reinforcement.

The collection of data should also take into account the reciprocal nature of teacher-student interactions (Kratochwill, 1985). By classifying classroom behavior into teacher and student initiator-responder units the consultant may gain insight for devising strategies that deal with teacher - student behavior that is "out-of-sinc." By gathering repeated measures of teacher-student interaction, the validity of the data can be assessed.

Another promising strategy for collecting assessment data is to collect multiple measures (Kratochwill, 1985). Direct observations, skill tests, interviews, and student self-report (see Figure 1) are useful methods. By using a multi-method assessment process advocated by specialists in behavior analysis, a more complete picture of student behavior and the influences upon that behavior are likely to be forthcoming. Measurement of target and nontarget behavior may be fruitful since problem behavior often is transitory (Kauffman, 1988), situation-specific (Gable & Strain, 1979), and may involve numerous aspects of both the physical and social environment (Bijou & Baer, 1978).

Important to evaluation of an intervention is recognition that unanticipated changes may result. By measuring several behaviors simultaneously, any "spill-over" effect on nontargeted behaviors will be documented.

In addition to the methods described above, simple anecdotal recording of information gleaned from the consultation interview(s) can serve as the basis for improving collaboration and for developing observation instruments. There is little doubt that teacher perceptions constitute an important variable with direct bearing on the referral problem (Larrivee & Cook, 1979). Failure to recognize and take into account the subjective attitudes of teachers may create errors in judgement (e.g., identifying inappropriate problems) and diminish the prospect of successful interventions. By acknowledging teacher perceptions and noting shifts in teacher perception and/or tolerance, the consulting teacher can identify strategies that s/he may use to interview and work with regular educators.

The assessment of academic skills (see Figure 1) can be accomplished by the administration of various curriculum-based assesment strategies (Choate et al., 1987). Preferrably, the regular classroom teacher will conduct this aspect of data collection; however, the consulting teacher may be required to do so. Ideally, it is important to observe the student's performance in different curriculum materials during different teaching

formats (e.g., independent work, tutorial, computer-assisted instruction, class lecture).

Various self-monitoring and self-report procedures can be used to engage the students themselves in the data collection process. Self-report and self-recording procedures may be useful in distinguishing differences between the target student and his/her classmates, documenting the stability of the problem over time (Kratochwill, 1985) and eliminating or reducing the problem itself (Hughes & Hendrickson, 1987).

Validating problems. As Cullinan, Epstein and Reimers (1981) and Kauffman (1988) discussed, the question of whether or not a referral problem deviates significantly from normative standards should be resolved prior to initiating treatment. As noted earlier, information that may be useful in prioritizing and validating the selection of target behaviors is presented in Table 1. Establishing classroom, school building and school district standards and expectations provides a reference point for contrasting current behavior and measuring the impact of the intervention. Validation of the problem can be accomplished through various procedures reported by Kerr and Zigmond (1986), Walker and Rankin (1983) and Yard and Thurman (1980).

Planning interventions. In contrast to the limited information on skills associated with the process and outcomes of school-based consultation, a substantial body of literature exists on strategies for direct instruction (e.g., Kerr & Nelson, 1983;

Kerr, Nelson & Lambert, 1987; Nelson, 1987; Schloss & Walker, 1979; Wallance & Kauffman, 1986; Sedlak, 1986). Selection of the actual intervention, however, must be guided by the recognition that some procedures will tax or exceed the ability and willingness of the mainstream teacher (cf. Witt & Elliott, 1985; Wood, 1988). Oftentimes, the more severe the referral problem, the less likely the intervention can be conducted successfully in a mainstream setting. Even though an intervention may be justifiable according to research, its complexity, intrusiveness and/or intensiveness may mitigate against use in the regular classroom. Examination of available resources also may lead to elimination of certain potentially effective strategies in favor of the practicality of others (Curtis & Meyers, 1985). A guideline used in a research/demonstration dropout prevention program that may have applicability to serving BD students in mainstream environments was to employ what was referred to as SEE strategies (Hendrickson, 1986). That is, a SEE procedure was any approach that was Simple for the regular classroom teacher to understand, had some Empirical validation in the literature, and was Easy to implement in the mainstream classroom (Hendrickson, 1986).

Finally, any intervention plan will be tempered by administrative policy and legal, political or even religious sanctions. Potential liability also is an issue to consider in the design of an intervention program (see Kerr & Nelson, 1983).

Once a plan is chosen it should contain a clear delineation of the activities and responsibilities of all participants (Gable et al., 1986; Kerr & Nelson, 1983; Marotz-Sprague & Nelson, 1981). The student's family should also be included in the design and implementation of the program. As in any program, specific goals and a timeline should be devised and reviewed at regular intervals to increase accountability of all participants and serve as a yardstick for evaluation.

Evaluating programs. A program evaluation plan addresses questions such as: "Is the program proceeding as intended? What changes, if any, are needed? What is required to transfer implementation from the consultant to the classroom teacher? From teacher A to teacher B?" As mentioned before, data on the problem behavior can be gathered through direct observation, skill assessment measures, anecdotal records, checklists, interviews and self-report (cf. Gable et al., 1986; Kerr & Nelson, 1983).

Another aspect of assessment relates to the assumption that knowledge of and active participation in the consultation process by the regular classroom teacher combines with the problem-solving and content skills of the special educator to positively influence the outcome of consultation (Gutkin, 1986). Available research suggests that the effectiveness of consultation may be mediated by both objective- and subjectively-based opinions of the participants (Friend, 1985; Gutkin, 1986; Morsink, 1984). Therefore, collection of subjective or consumer satisfaction data

can contribute to refinement of both the qualitative and quantitative aspects of consultation.

Following-up. It is important to be equally as systematic about "phasing out" consultative support as it is to identifying the problem, designing and implementing interventions, and evaluating efforts. Periodic follow-up contacts are recommended to help ensure that the regular classroom teacher remains faithful to the program and that any additional support that may be needed can be provided readily. Although guidelines for the best procedure for phasing out consultation services are limited, some literature suggests that maintenance of teacher contact on a schedule to every 7 to 10 days is desirable.

To assist the consulting teacher, a Case Record Form is presented in Table 3. It is simply a protocol designed for use in documenting the major aspects of the consultant's tasks. The form parallels in content the flow chart of activities (see Figure 1) and provides space for noting referral information, and information gathered during consultation interviews, and when analyzing problems, collecting data, validating problems, planning interventions, evaluating programs, and following up. Space also is available for entering the date of various activities and the outcomes and follow-up action plans.

An Ecobehavioral Perspective to Consultation

Many teachers recognize that analysis of a student's problem behavior is incomplete without taking into account the fit between

Table 3
Case Record Form

Student Name: _____ Gr/Placement: _____
Consultant: _____ Reg.Teacher: _____
Date: _____ Setting: _____

1. Referral Information

_____
_____
_____
_____

2. Consultation Interview

_____
_____
_____
_____

3. Problem Specification Excess ( ) Deficit ( )
Define & Explain: _____
_____
_____
_____
Problem Validation: _____

4. Problem Analysis
General Setting Events: _____
_____
Specific Environmental Stimuli: _____
_____
Schedules of Reinforcement: _____
_____
Other: _____

5. Sources of Problem Specification and Analysis Data
Consultation Interview(s) ( ): _____
Behavior Checklist ( ): _____
Self-Report ( ): _____
Questionnaire ( ): _____
Other Interviews ( ): _____
Direct Observation ( ): _____
Other ( ): _____

Case Record Form
Continued

6. Implementation Plan
   (a) Intervention: _____
   _____
   _____
   _____
   (b) Responsibilities of Participants: _____
   _____
   _____
   (c) Goal(s): _____
   _____
   _____
   (d) Timeline: _____
   _____
   _____

7. Data Collection and Measurement Tools
   _____
   _____
   _____

8. Evaluation Plan
   _____
   _____

9. Phase-out and Follow-up Plan
   _____
   _____
   _____

CASE NOTES:

Date	Activity	Outcome/Action Plan

the student and significant aspects of the environment. As Algozzine (1980) argued, a lack of congruence is as much reflective of the reactions of others to a behavior as it is the behavior itself. The amount of discrepancy between a specific students characteristic behavior patterns and a teacher's standards and expectations may be indicative of the probability of ameliorating the referral problem. While the consultation process necessarily will begin by focusing upon the student's behavior, the consulting teacher also must assess the "goodness of fit" and the potential for change in both the student and the teacher. In some instances, changing the student's behavior may be sufficient to remedy the teacher's perception of the referral problem.

Establishing an hypothesis about an effective way to intervene may be facilitated by employing an ecobehavioral perspective (Gable et al., 1988; Hendrickson, et al., 1987). Regardless of the setting in which the problem occurs, pinpointing and analyzing the referral problem can be facilitated by identification of situational variables likely to be affecting its occurrence or nonoccurrence. The major factors to observe, assess and potentially manipulate include: (a) the general setting events--intrapersonal (internal) variables and interpersonal (external) variables which increase or decrease the power of the specific antecedent or consequent stimuli (e.g., an angry state, the social studies lesson), (b) specific environmental stimuli--physical or social events that elicit, maintain or

diminish student behavior and that immediately precede and follow the behavior of interest (e.g., curricular material, teacher verbalizations) and, (c) schedules of reinforcement--the arrangement of contingencies operating in relation to the problem behavior (e.g., intermittent reinforcement) and incompatible behaviors (studying quietly).

From an ecobehavioral perspective (Hendrickson et al., 1987), assessment and treatment reaches beyond a given situation in which a student's behavior has resulted in negative attention. Traditionally, the setting for dealing with disturbing behavior has been the classroom. Within the education system, the classroom is the primary and often the only setting for intervention. From an ecobehavioral perspective the school building and grounds constitute secondary settings within which assessments and interventions may be required. Both adults and peers have been successfully involved in the treatment of behavior problems identified in primary and secondary settings. Finally, the home and community are tertiary settings in which the same or other disturbing behaviors may be evidenced. Although not always practical, ample evidence exists that maintenance and generalization of behavioral gains must be programmed systematically in the natural environment. Within the classroom and school the consulting teacher and mainstream teacher have the greatest ability to control environmental variables that most directly influence a student's behavior. (Hendrickson et al.,

1986). Once the student is in tertiary settings, the parents, peers and significant others are most influential. By making a concerted effort to positively involve individuals from the student's greater ecosystem, ecologically sound intervention strategies are more likely to be forthcoming.

Rejection of a narrow "student-centered" orientation for this broader perspective on consultation reflects recognition that human behavior is a complex set of person-person and person-environment interactions. The ecobehavioral approach to assessmentand treatment of children with learning disabilities and behavioral disorders incorporates these propositions and appears to hold promise for teacher consultants working with special students in the mainstream. As with any promising intervention approach, consultation models can be no more successful than the commitment, talent and resources of the teachers and administrators involved. For the LD and BD student, however, the sum of expertise and investment derived from a consultation approach holds greater promise for reintegration than isolated, unsystematic efforts.

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